

DECLARATION AND POWER OF ATTORNEY

BIAGIO RAVO, declares:

I am a citizen of the Italy, whose post-office address is Rome American Hospital, Via Emilio Longoni, 69 - Rome, Italy 00155.

I believe myself to be the original, first and sole inventor of the improvement entitled "Inflatable Intraluminal Molding Device" which is described and claimed in the application Serial No. 09/245,788, filed February 5, 1999.

I have reviewed and understand the contents of the specification, including the claims.

I do not know and do not believe that the same was ever known or used in the United States before my invention thereof; or patented or described in any printed publication in any country before my invention or more than one year prior to this application; or in public use or on sale in the United States more than one year prior to this application.

Said invention has not been patented or been made the subject of an inventor's certificate in any country foreign to the United States on an application filed by me or my legal representatives or assigns more than twelve months prior to this application.

I acknowledge my duty to disclose information of which I am aware which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

No application for patent or inventor's certificate thereon has been filed by me or my legal representatives or assigns in any country foreign to the United States.

I declare further that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

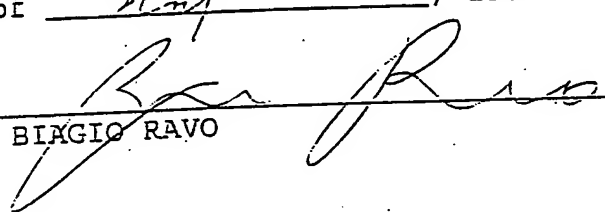
I hereby appoint Blynn L. Shideler, Registration No. 35,034; William H. Logsdon, Registration No. 22,132; Russell D. Orkin, Registration No. 25,363; David C. Hanson, Registration No. 23,024; Richard L. Byrne, Registration No. 28,498; Frederick B. Ziesenheim, Registration No. 19,438; Kent E. Baldauf, Registration No. 25,826; Barbara E. Johnson, Registration No. 31,198; Paul M. Reznick, Registration No. 33,059; John W. McIlvaine, Registration No. 34,219; Michael I. Shamos, Registration No. 30,424; Julie W. Meder, Registration No. 36,216;

Lester N. Fortney, Registration No. 38,141; Jesse A. Hirshman, Registration No. 40,016; Randall A. Notzen, Registration No. 36,882; James G. Porcelli, Registration No. 33,757; Kent E. Baldauf, Jr., Registration No. 36,082; Deborah M. Altman, Registration No. 42,259; Dean E. Geibel, Registration No. 42,570; and Thomas J. Clinton, Registration No. 40,561, whose post-office address is 700 Koppers Building, 436 Seventh Avenue, Pittsburgh, Pennsylvania 15219-1818, Telephone No. 412-471-8815, my attorneys with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, to amend the specification, to appeal in case of rejection, as they may deem advisable, to receive the patent when granted and generally to do all matters and things needful in the premises, as fully and to all intents and purposes as I could do.

All correspondence and telephone calls should be addressed to Blynn L. Shideler.

I hereby subscribe my name to the foregoing specification and claims, declaration and power of attorney this 1 day of April, 1999.

Inventor


BIXIO RAVO

PTO/SB/82 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	08/817,858
Filing Date	9/27/2001
First Named Inventor	RAVO, Biagio
Art Unit	1641
Examiner Name	LAM, Ann
Attorney Docket Number	3082.003

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 00037999

☐ Please change the correspondence address for the above-identified application to:

☐ The address associated with
Customer Number:

OR

☐ Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

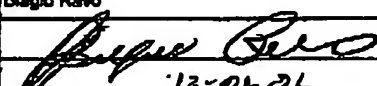
Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Biagio Ravo		
Signature			
Date	12-01-04	Telephone	01139335-611103

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to the (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 9450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-0169 and select option 2.

BEST AVAILABLE COPY